

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

ADDRESS (number and street) ▼

1325 G Street, N.W. Suite 1000

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20005-3134 -

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00109306

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☒ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Beth Rivera Cruz, Assistant Treasurer

Signature of Treasurer

Beth Rivera Cruz, Assistant Treasurer

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Report Covering the Period: From: M M / D D / Y Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y Y 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		66643.87
(b) Cash on Hand at Beginning of Reporting Period.....	73893.87	
(c) Total Receipts (from Line 19)	57500.00	92750.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	131393.87	159393.87
7. Total Disbursements (from Line 31)	42500.00	70500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	88893.87	88893.87
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

WHOLESALE-DETRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DETRIBUTORS

Report Covering the Period:

From:

 M M / D D / Y Y Y Y
 04 01 2014

To:

 M M / D D / Y Y Y Y
 06 30 2014
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

47500.00

81750.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

47500.00

81750.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

10000.00

10000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

57500.00

91750.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

1000.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

57500.00

92750.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

57500.00

92750.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	42500.00	70500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	42500.00	70500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	42500.00	70500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	57500.00	91750.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	57500.00	91750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 20
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WHOLESALE-DEVELOPERS PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DEVELOPERS

Full Name (Last, First, Middle Initial)

A. Mr. Brad Blevins

Mailing Address 421 Hart Lane-PO Box 160387

City State Zip Code
Nashville TN 37216-0387

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blevins Inc

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.6966

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Tim Buche

Mailing Address 2 Jenner, Suite 150

City State Zip Code
Irvine CA 92618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Motorcycle Industry Council

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11AI.6968

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Gana R. Dunlop

Mailing Address P. O. Box 5507

City State Zip Code
Rockville MD 20855

FEC ID number of contributing
federal political committee.

C

Name of Employer

Roberts Oxygen Company, Inc.

Occupation

Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2014

Transaction ID : SA11AI.6963

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Full Name (Last, First, Middle Initial)

A. Jeff Hamar

Mailing Address 9303 Greenleaf Ave.

City State Zip Code
 Santa Fe Springs CA 90670

FEC ID number of contributing
federal political committee.

C

Name of Employer

Galleher Corp

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : SA11AI.6955

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Charles T. Kellogg

Mailing Address Box 790

City State Zip Code
 Waterbury CT 06720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hubbard-Hall Inc.

Occupation

Chairman/CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 07 / 2014

Transaction ID : SA11AI.6960

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Mark Kramer

Mailing Address 6800 Broken Sound Pkwy #150

City State Zip Code
 Boca Raton FL 33487

FEC ID number of contributing
federal political committee.

C

Name of Employer

Laird Plastics

Occupation

President/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11AI.6973

Amount of Each Receipt this Period

3000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 20
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Full Name (Last, First, Middle Initial)

A. Patrick L. Larmon

Mailing Address One City Place Drive, Suite 200

City State Zip Code
 St. Louis MO 63141

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bunzl Distribution

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 30 / 2014

Transaction ID : SA11AI.6957

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mr. Richard Lofgren

Mailing Address 600 S Santa Fe Dr

City State Zip Code
 Denver CO 80223-2403

FEC ID number of contributing
federal political committee.

C

Name of Employer

United States Welding Inc

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 30 / 2014

Transaction ID : SA11AI.6958

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Michael Medart

Mailing Address 124 Manufacturers Dr

City State Zip Code
 St Louis MO 63010-4727

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medart Marine

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 08 / 2014

Transaction ID : SA11AI.6964

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 20
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Full Name (Last, First, Middle Initial) A. Mr. Charles Merinoff		Date of Receipt M M / D D / Y Y Y Y Y 06 / 23 / 2014 Transaction ID : SA11AI.6975	
Mailing Address 60 E 42nd St #1915 City New York State NY Zip Code 10165		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Charmer Sunbelt Group (The) Occupation CEO & Vice Chairman			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) B. Joseph Nettemeyer		Date of Receipt M M / D D / Y Y Y Y Y 04 / 25 / 2014 Transaction ID : SA11AI.6954	
Mailing Address 1941 Ringwood Avenue City San Jose State CA Zip Code 95131		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer VAlin Corp Occupation Pres/CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) C. Eveline Roberts		Date of Receipt M M / D D / Y Y Y Y Y 05 / 12 / 2014 Transaction ID : SA11AI.6967	
Mailing Address 14626 Chesterfield Rd City Rockville State MD Zip Code 20853		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer None Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	
SUBTOTAL of Receipts This Page (optional)..... ▶		15000.00	
TOTAL This Period (last page this line number only)..... ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 20
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Full Name (Last, First, Middle Initial)

A. William Roberts

Mailing Address P. O. Box 5507

City State Zip Code
 Rockville MD 20855

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Roberts Oxygen Company, Inc.

Occupation
 President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 12 / 2014

Transaction ID : SA11AI.6965

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Mr. W. Grady Rosier

Mailing Address 4747 McLane Pkwy

City State Zip Code
 Temple TX 76504-6115

FEC ID number of contributing
federal political committee.

C

Name of Employer
 McLane Co Inc

Occupation
 President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 16 / 2014

Transaction ID : SA11AI.6969

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Richard W. Schwartz

Mailing Address 3110 Kettering Blvd.

City State Zip Code
 Dayton OH 45439

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Win Wholesale Inc

Occupation
 President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 29 / 2014

Transaction ID : SA11AI.6971

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WHOLESALE-DEVELOPERS PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DEVELOPERS

Full Name (Last, First, Middle Initial)

A. Mr. John Tracy

Mailing Address 17050 Baxter Road #250

City State Zip Code
 Chesterfield MO 63005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dot Foods Inc

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11AI.6959

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Carlos E. Zumarraga

Mailing Address 9302 NW 101st

City State Zip Code
 Miami FL 33178

FEC ID number of contributing
federal political committee.

C

Name of Employer

Zuma & Sons Distributors Corp

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 23 / 2014

Transaction ID : SA11AI.6951

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

47500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 20

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WHOLESALE-DEVELOPERS PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DEVELOPERS

Full Name (Last, First, Middle Initial)

A. ALEX LEE INC PAC

Mailing Address 120 4th Street SW

City State Zip Code
Hickory NC 28602

FEC ID number of contributing
federal political committee.

C C00371385

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 29 2014

Transaction ID : SA11C.6970

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. MAC-PAC-USA

Mailing Address 4747 McLane Parkway

City State Zip Code
Temple TX 76504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 16 2014

Transaction ID : SA11C.6974

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10000.00

10000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Full Name (Last, First, Middle Initial)

A. BEN SASSE FOR US SENATE INC

Mailing Address 105 EAST 6TH STREET

City
FREMONTState
NEZip Code
68025Purpose of Disbursement
Political Contribution

Candidate Name

BENJAMIN E SASSE

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2014

☐ Primary☒ General☐ Other (specify) ▼

State: NE

District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	29	/	2014

Transaction ID : SB23.6906

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. BEN SASSE FOR US SENATE INC

Mailing Address 105 EAST 6TH STREET

City
FREMONTState
NEZip Code
68025Purpose of Disbursement
Political Contribution

Candidate Name

BENJAMIN E SASSE

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2014

☐ Primary☒ General☐ Other (specify) ▼

State: NE

District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	10	/	2014

Transaction ID : SB23.6921

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. BOBBY SCHILLING FOR CONGRESS

Mailing Address 367 AVENUE OF THE CITIES SUITE D

City
EAST MOLINEState
ILZip Code
61244

Purpose of Disbursement

Candidate Name

ROBERT T. SCHILLING

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2014

☐ Primary☒ General☐ Other (specify) ▼

State: IL

District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	16	/	2014

Transaction ID : SB23.6936

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Full Name (Last, First, Middle Initial)

A. BUCK FOR COLORADO

Mailing Address PO BOX 338108

City	State	Zip Code
GREELEY	CO	80633

Purpose of Disbursement
Political Contribution

Candidate Name

KENNETH R BUCK

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

Transaction ID : SB23.6902

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CHARLES BOUSTANY JR. MD FOR CONGRESS, INC.

Mailing Address PO BOX 80126

City	State	Zip Code
LAFAYETTE	LA	70598

Purpose of Disbursement
Political Contribution

Candidate Name

CHARLES W. DR. JR. BOUSTANY

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: LA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SB23.6909

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City	State	Zip Code
LONE TREE	CO	80124

Purpose of Disbursement
Political Contribution

Candidate Name

CORY GARDNER

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		10		2014

Transaction ID : SB23.6912

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Full Name (Last, First, Middle Initial)

A. COTTON FOR SENATE

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Political Contribution

Candidate Name

THOMAS COTTON

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: AR District: 00

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2014

Transaction ID : SB23.6875

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. COTTON FOR SENATE

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Political Contribution

Candidate Name

THOMAS COTTON

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: AR District: 00

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		24		2014

Transaction ID : SB23.6945

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. DAVID ROUZER FOR CONGRESS

Mailing Address PO BOX 2267

City	State	Zip Code
SMITHFIELD	NC	27577

Purpose of Disbursement
Political Contribution

Candidate Name

DAVID CHESTON MR. ROUZER

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NC District: 07

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		10		2014

Transaction ID : SB23.6918

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

8500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Full Name (Last, First, Middle Initial)

A. DOLD FOR CONGRESS

Mailing Address PO BOX 6312

City	State	Zip Code
LIBERTYVILLE	IL	60048

Purpose of Disbursement
Political Contribution

Candidate Name

ROBERT JAMES JR DOLD

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		08		2014

Transaction ID : SB23.6890

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. DR MONICA WEHBY FOR US SENATE

Mailing Address PO BOX 3375

City	State	Zip Code
PORTLAND	OR	97208

Purpose of Disbursement
Political Contribution

Candidate Name

MONICA WEHBY

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		08		2014

Transaction ID : SB23.6893

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. DR MONICA WEHBY FOR US SENATE

Mailing Address PO BOX 3375

City	State	Zip Code
PORTLAND	OR	97208

Purpose of Disbursement
Political Contribution

Candidate Name

MONICA WEHBY

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: OR District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		16		2014

Transaction ID : SB23.6939

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

7000.00

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<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input checked="" type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Three digital displays showing the date 06/10/2014 in MM/DD/YYYY format. The first display shows '06', the second shows '10', and the third shows '2014'. Each display has a label above it: 'M M' for the first, 'D D' for the second, and 'Y Y Y Y' for the third.

1000.00



1000.00

Education Level	Percentage
Graduate	100%
Postgraduate	100%
High school	100%
Less than high school	100%

3000.00

The diagram shows a rectangular frame with 12 vertical members and 2 horizontal members. A cross-section of a member is shown, indicating a rectangular shape with a central void.

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Full Name (Last, First, Middle Initial)

A. JONI ERNST FOR US SENATE INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	16	/	2014

Mailing Address PO BOX 93441

City	State	Zip Code
DES MOINES	IA	50393

Transaction ID : SB23.6930Purpose of Disbursement
Political Contribution

Amount of Each Disbursement this Period

Candidate Name

JONI K ERNST

Category/
Type

2500.00

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: IA District: 00

Full Name (Last, First, Middle Initial)

B. RODNEY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	09	/	2014

Mailing Address PO BOX 344

City	State	Zip Code
TAYLORVILLE	IL	62568

Transaction ID : SB23.6896Purpose of Disbursement
Political Contribution

Amount of Each Disbursement this Period

Candidate Name

RODNEY L DAVIS

Category/
Type

1000.00

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 13

Full Name (Last, First, Middle Initial)

C. SIMPSON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	24	/	2014

Mailing Address 1487 PARKWAY DRIVE

City	State	Zip Code
BLACKFOOT	ID	83221

Transaction ID : SB23.6881Purpose of Disbursement
Political Contribution

Amount of Each Disbursement this Period

Candidate Name

MICHAEL SIMPSON

Category/
Type

1000.00

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: ID District: 02

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Full Name (Last, First, Middle Initial)

A. STEVE CHABOT FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

Mailing Address 3030 HARRISON AVE.

City	State	Zip Code
CINCINNATI	OH	45211

Transaction ID : SB23.6942Purpose of Disbursement
Political Contribution

Amount of Each Disbursement this Period

Candidate Name

STEVE CHABOTCategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 01

Full Name (Last, First, Middle Initial)

B. SULLIVAN FOR US SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		10		2014

Mailing Address 3705 ARCTIC BLVD #447

City	State	Zip Code
ANCHORAGE	AK	99503

Transaction ID : SB23.6924Purpose of Disbursement
Political Contribution

Amount of Each Disbursement this Period

Candidate Name

DAN SULLIVANCategory/
Type

4000.00

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AK District: 00

Full Name (Last, First, Middle Initial)

C. TERRI LYNN LAND FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		16		2014

Mailing Address PO BOX 308

City	State	Zip Code
GRANDVILLE	MI	49418

Transaction ID : SB23.6933Purpose of Disbursement
Political Contribution

Amount of Each Disbursement this Period

Candidate Name

TERRI LYNN LANDCategory/
Type

2500.00

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Full Name (Last, First, Middle Initial)

A. WALBERG FOR CONGRESS

Mailing Address PO BOX 1362

City	State	Zip Code
JACKSON	MI	49204

Purpose of Disbursement
Political Contribution

Candidate Name

TIMOTHY WALBERGOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	10	/	2014

Transaction ID : SB23.6927

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. WALORSKI FOR CONGRESS INC

Mailing Address PO BOX 954

City	State	Zip Code
MISHAWAKA	IN	46546

Purpose of Disbursement
Political Contribution

Candidate Name

JACKIE WALORSKI SWIHARTOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	24	/	2014

Transaction ID : SB23.6884

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. WOMACK FOR CONGRESS COMMITTEE

Mailing Address PO BOX 508

City	State	Zip Code
ROGERS	AR	72757

Purpose of Disbursement
Political Contribution

Candidate Name

STEVE WOMACKOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: AR District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	03	/	2014

Transaction ID : SB23.6871

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

42500.00
